



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3516

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 10/658,959 | FILING OR 371(c) DATE 09/10/2003 RULE | CLASS 514 | GROUP ART UNIT 1625 | ATTORNEY DOCKET NO. 02-793-C |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS

Varghese John, San Francisco, CA;
 Michel Maillard, Redwood City, CA;
 James P. Beck, Zionsville, IN;
 Eric T. Baldwin, Carmel, IN;
 Robert Hughes, Eureka, MO;
 Shon R. Pulley, Carmel, IN;
 Ruth TenBrink, Labadie, MO;

**** CONTINUING DATA *******

This appln claims benefit of 60/409,453 09/10/2002 and claims benefit of 60/452,231 03/05/2003
 and claims benefit of 60/491,757 08/01/2003

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 12/03/2003

| | | | | |
|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 0 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature <i>md</i> Initials <i>md</i> | | | | |

ADDRESS

20306

TITLE

ACETYL 2-HYDROXY-1, 3-DIAMINOALKANES

| | | |
|--|---|---|
| FILING FEE RECEIVED 1245 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|--|---|---|